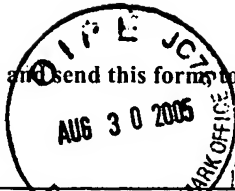


# PART B - FEE(S) TRANSMITTAL

Complete and send this form together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (703) 746-4000



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All future correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

24735 7590 06/30/2005

BAKER BOTTS LLP  
C/O INTELLECTUAL PROPERTY DEPARTMENT  
THE WARNER, SUITE 1300  
1299 PENNSYLVANIA AVE, NW  
WASHINGTON, DC 20004-2400

09/01/2005 MBEYENE2 00000046 10810710

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

|                    |
|--------------------|
| (Depositor's name) |
| (Signature)        |
| (Date)             |

|                       |                      |                     |                 |             |                      |                     |                  |
|-----------------------|----------------------|---------------------|-----------------|-------------|----------------------|---------------------|------------------|
| 01 FC:1501 1400.00 OP | 02 FC:1504 300.00 OP | 03 FC:8001 35.00 OP | APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|                       |                      |                     | 10/810,710      | 03/29/2004  | Takashi Tokunaga     | 074913.0121         | 9346             |

TITLE OF INVENTION: CONNECTOR TO BE MOUNTED TO A BOARD AND GROUND STRUCTURE OF THE CONNECTOR

|                |              |           |                 |                  |            |
|----------------|--------------|-----------|-----------------|------------------|------------|
| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
| nonprovisional | NO           | \$1400    | \$300           | \$1700           | 09/30/2005 |

|                |          |                |
|----------------|----------|----------------|
| EXAMINER       | ART UNIT | CLASS-SUBCLASS |
| PAUMEN, GARY F | 2833     | 439-608000     |

|  |   |
|--|---|
| <p>1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</p> <p><input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</p> <p><input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</p> | <p>2. For printing on the patent front page, list</p> <p>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</p> <p>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</p> <p><u>Baker Botts L.L.P.</u></p> <p>2 _____</p> <p>3 _____</p> |
|--|---|

### 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Japan Aviation  
Electronics Industry Limited

Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

#### 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 12

#### 4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-0375 (enclose an extra copy of this form).

#### 5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Frederick G. Michaud

Typed or printed name Frederick G. Michaud

Date 8/30/05

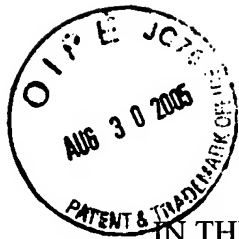
Registration No. 26,003

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



| FEE TRANSMITTAL<br><br>[MAIL STOP ISSUE FEE]  |                      | Complete If Known  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
|---|----------------------|--|---------------------|--------------------------|--------------|--------|-----------------|----------|--|----|---|----|---|----|---|----|--|----|---|----|--|-------------|---|----|--|----|--|----|---|----|---|----|--|----|---|----|--|----|---|----|---|----|--|-----------|
|   |                      | Application No.  | 10/810,710          |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
|   |                      | Filing Date  | March 29, 2004      |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
|   |                      | First Named Inventor   | Takashi Tokunaga    |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
|   |                      | Examiner Name  | Gary F. Paumen      |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
|   |                      | Group Art Unit   | 2833                |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Total Amount Of Payment (\$)  |                      | 1,736.00   | Attorney Docket No. | 074913.0121              |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <b>METHOD OF PAYMENT (check one)</b>  |                      | <b>FEE CALCULATION (continued)</b>   |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| 1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to <b>Deposit Account No. 02-0375</b> in the name of Baker Botts L.L.P.   |                      | 3. <b>ADDITIONAL FEES</b>  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Charge any additional fee required under 37 C.F.R. §§ 1.16 and 1.17 to <b>Deposit Account No. 02-0375</b> .  |                      | <table border="1"><thead><tr><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td><input type="checkbox"/> Surcharge - late filing fee or oath</td><td>\$</td></tr><tr><td><input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet</td><td>\$</td></tr><tr><td><input type="checkbox"/> Extension for reply with 1 month</td><td>\$</td></tr><tr><td><input type="checkbox"/> Notice of Appeal</td><td>\$</td></tr><tr><td><input type="checkbox"/> Filing Brief in Support of Appeal</td><td>\$</td></tr><tr><td><input type="checkbox"/> Request for Oral Hearing</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Utility Issue Fee (or reissue)</td><td>\$ 1,400.00</td></tr><tr><td><input type="checkbox"/> Design Issue Fee</td><td>\$</td></tr><tr><td><input type="checkbox"/> Plant Issue Fee</td><td>\$</td></tr><tr><td><input type="checkbox"/> Petitions to Commissioner</td><td>\$</td></tr><tr><td><input type="checkbox"/> Petition to Revive (unavoidable)</td><td>\$</td></tr><tr><td><input type="checkbox"/> Petition to Revive (unintentional)</td><td>\$</td></tr><tr><td><input type="checkbox"/> Petitions Related to Provisional Applications</td><td>\$</td></tr><tr><td><input type="checkbox"/> Submission of Information Disclosure Statement</td><td>\$</td></tr><tr><td><input type="checkbox"/> Filing Submission After Final Rejection</td><td>\$</td></tr><tr><td><input type="checkbox"/> Recordation of Assignment Document</td><td>\$</td></tr><tr><td><input type="checkbox"/> Filing Request for Reexamination</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Other (specify) Public Fee and Advanced Patent Copies (12)</td><td>\$ 336.00</td></tr></tbody></table> |                     |                          |              |        | Fee Description | Fee Paid | <input type="checkbox"/> Surcharge - late filing fee or oath | \$ | <input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet | \$ | <input type="checkbox"/> Extension for reply with 1 month | \$ | <input type="checkbox"/> Notice of Appeal | \$ | <input type="checkbox"/> Filing Brief in Support of Appeal | \$ | <input type="checkbox"/> Request for Oral Hearing | \$ | <input checked="" type="checkbox"/> Utility Issue Fee (or reissue) | \$ 1,400.00 | <input type="checkbox"/> Design Issue Fee | \$ | <input type="checkbox"/> Plant Issue Fee | \$ | <input type="checkbox"/> Petitions to Commissioner | \$ | <input type="checkbox"/> Petition to Revive (unavoidable) | \$ | <input type="checkbox"/> Petition to Revive (unintentional) | \$ | <input type="checkbox"/> Petitions Related to Provisional Applications | \$ | <input type="checkbox"/> Submission of Information Disclosure Statement | \$ | <input type="checkbox"/> Filing Submission After Final Rejection | \$ | <input type="checkbox"/> Recordation of Assignment Document | \$ | <input type="checkbox"/> Filing Request for Reexamination | \$ | <input checked="" type="checkbox"/> Other (specify) Public Fee and Advanced Patent Copies (12) | \$ 336.00 |
| Fee Description   | Fee Paid             |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Surcharge - late filing fee or oath  | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Extension for reply with 1 month   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Notice of Appeal   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Filing Brief in Support of Appeal  | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Request for Oral Hearing   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input checked="" type="checkbox"/> Utility Issue Fee (or reissue)  | \$ 1,400.00          |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Design Issue Fee   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Plant Issue Fee  | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Petitions to Commissioner  | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Petition to Revive (unavoidable)   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Petition to Revive (unintentional)   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Petitions Related to Provisional Applications  | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Submission of Information Disclosure Statement   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Filing Submission After Final Rejection  | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Recordation of Assignment Document   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input type="checkbox"/> Filing Request for Reexamination   | \$                   |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <input checked="" type="checkbox"/> Other (specify) Public Fee and Advanced Patent Copies (12)  | \$ 336.00            |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| 2. <input checked="" type="checkbox"/> Check Enclosed. The Commissioner is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to <b>Deposit Account No. 02-0375</b> in the name of Baker Botts L.L.P., The Warner, Suite 1300, 1299 Pennsylvania Avenue, N.W., Washington, D.C. 20004-2400. |                      |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <b>FEE CALCULATION</b>  |                      |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| 1. <b>BASIC FILING FEE</b> <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity   |                      |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
|   |                      | <b>Fee Paid</b>  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Utility Filing Fee  |                      | \$   |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Design Filing Fee   |                      | \$   |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Plant Filing Fee  |                      | \$   |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Reissue Filing Fee  |                      | \$   |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Provisional Filing Fee  |                      | \$   |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| 2. <b>EXTRA CLAIMS FEES</b>   |                      |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <b>CLAIMS AS AMENDED</b>  |                      |  |                     |                          |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| For   | Number Present       | Highest Number Paid For  | Extra               | Rate                     |              | Amount |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
|   |                      |  |                     | Large Entity             | Small Entity |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| TOTAL CLAIMS  | 0                    | 20   | 0                   | x \$ 50.00               | x \$ 25.00   | \$0.00 |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| INDEPENDENT CLAIMS  | 0                    | 3  | 0                   | x \$ 200.00              | \$ 100.00    | \$0.00 |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| MULTIPLE DEPENDENT CLAIMS   |                      |  |                     | \$ 360.00                | \$ 180.00    | \$0.00 |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| <b>TOTAL EXTRA CLAIMS FEES</b>  |                      |  |                     |                          |              | \$0.00 |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| SUBMITTED BY  |                      |  |                     | Complete (if applicable) |              |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Typed or Printed Name   | Frederick G. Michaud |  |                     | Registration No.         | 26,003       |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
| Signature   |                      |  |                     | Date                     | 08/30/05     |        |                 |          |  |    |   |    |   |    |   |    |  |    |   |    |  |             |   |    |  |    |  |    |   |    |   |    |  |    |   |    |  |    |   |    |   |    |  |           |
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PATENT  
Attorney Docket No. 074913.0121

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Takashi Tokunaga ) Examiner Gary F. PAUMEN  
Application Number: 10/810,710 ) Group Art Unit 2833  
Filed: March 29, 2004 ) **Confirmation No. 9346**  
FOR: CONNECTOR TO BE MOUNTED TO A BOARD AND GROUND  
STRUCTURE OF THE CONNECTOR )

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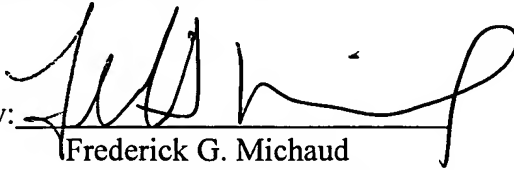
Sir:

In accordance with the Notice of Allowance and Fee(s) Due mailed June 30, 2005, Applicant is enclosing a check covering the Issue Fee, Publication Fee, and cost for 12 advance copies of the patent in the amount of \$1736.00 (\$1400.00, \$36.00, and \$300.00) for filing in the above-captioned patent application. Applicant also is enclosing Part B of the Fees Transmittal. In the event of any variance between the amount enclosed and the fees determined

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Respectfully submitted,

BAKER BOTTS, L.L.P.

By:   
Frederick G. Michaud  
Registration No. 26,003

Dated: August 30, 2005

Baker Botts, L.L.P.  
The Warner - Suite 1300  
1299 Pennsylvania Avenue, N.W.  
Washington, D.C. 20004-2400  
Tel: (202) 639-7700  
Fax: (202) 639-7890

JBA/sr  
Enclosures